PATENT APPLICATION FEE DETERMINATION RECORD									Application or Docket Number					
	Effective October 1, 2001													
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY			
TOTAL CLAIMS							Г	RATE	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BA	BASIC FEE 370.00		OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			i - minus 20=		*	Y		X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			minus 3 =		*			X42=		OR	X84=			
MULTIPLE DEPENDENT CLAIM PR			RESENT				4	+140=		OR	+280=	• · ·		
* If	* If the difference in column 1 is less than zero, enter "0" in column 2							TOTAL		OR	TOTAL			
	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							MALL	ENTITY	OR	OTHER SMALL			
MTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE /		RATE	ADDI- TIONAL FEE		
AMENDMENT	Total	* all	Minus	**2	1	=	,	X\$ 9=		OR	X\$18=			
	Independent	. 4	Minus			=		X42=		OR	X84=			
۷	FIRST PRESE	SENTATION OF MULTIPLE DEPENDENT CLAIM						+140=		OR	+280=			
							L_	TOTAL	-	OR	TOTAL ADDIT. FEE	7		
(Column 1) (Column 2) (Column 3)								DIT. FEE		•	ADDITE CEL			
4TB		(Column 1) CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	IEST IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
DMENT	Total	* 2	Minus	** 2	-1	=	;	X\$ 9=	١	OR	X\$18=			
AMEND	Independent	. 4	Minus	***	4	=		X42=		OR	X84=			
4	FIRST PRESE	NTATION OF M	ULTIPLE DEF	PENDEN	CLAIM		\	140=		OR	+280=			
							L_ AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	\		
	1	(Column 1)		(Colu	mn 2)	(Column 3)	,	D11.1 E.E.						
NTC	ag the Justice of	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUW PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA	, des	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAI FEE		
DME	Total	* 2	Minus	** 6	21	=	;	X\$ 9=	.]	OR	X\$18=			
AMENDMENT C	Independent	. Ц	Minus	***	4			X42=		OR	X84=			
الا	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ı -			1		17		

* If th entry in column 1 is less than th entry in column 2, write "0" in column 3.

** If th "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

OR

+140=

+280=

TOTAL ADDIT. FEE

								Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective October 1, 2000								RD 09/727.806					
CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE			OR	OTHER SMALL		
TOTAL CLAIMS							RATE FEE			7	RATE	FEE	
FO)R		NUMBER	FILED	NUME	BER EXTRA	BAS	IC FEE	355.00	OR	BASIC FEE	710.00	
тс	OTAL CHARGEA	BLE CLAIMS	2/ minus 20= *		· /			\$ 9=	9	OR	X\$18=		
INE	DEPENDENT CL	LAIMS	/ minus 3 = * /				X	40=	40	OR	X80=		
MU	ILTIPLE DEPEN	NDENT CLAIM PI	RESENT			+1	35=	1	OR	+270=			
* If	the difference	in column 1 is	less than zero, enter "0" in column 2				TC	TAL		OR	TOTAL		
	CLAIMS AS AMENDED - PART II										OTHER	THAN	
_		(Column 1)		(Colur		(Column 3)	SM	ALL	ENTITY	OR	SMALL		
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	IBER OUSLY	PRESENT EXTRA	R/	ATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
AME	Independent	*	Minus	***		=	Χ	10=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							 35=		1	+270=		
i I							<u> </u>	35= OTAL		OR	+270= TOTAL		
	· ,	(Calumn 1)		(Calu	···· 0\	(O-1,	ADDI			OR	ADDIT. FEE		
		(Column 1) CLAIMS	38 3	(Colur HIGH		(Column 3)			, A D D I	1 1		150	
MENT B	itani iti	REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
AMEND	Independent	*	Minus	***	TOL AIM]=	X 4	0=		OR	X80=		
سا	FINOI Phesei	NTATION OF MU	ILIPLE DEF	'ENDEN I	CLAIIVI		+10	35=		OR	+270=		
			T ADDIT	OTAL FEF		OR	TOTAL ADDIT. FEE						
	(Column 1) (Column 2) (Column 3)									•	100mm		
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA	RA	TE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NON	Total	*	Minus	**		=	X\$	9=		OR	X\$18=		
ME	Independent	*	Minus	***		=	X4	∩ ₌		ŀ	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<u></u>		OR			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.								5=		OR	+270=		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." TOTAL ADDIT. FEE ADDIT. FEE													
The "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													